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28 10	E)				Approv	ved for use through		/SB/17 (10-07) MB 0651-0032		
MAR	Under the Pape	erwork Reduction Act of 1	995, no person are require		ent and Tradem	ark Office; U.S. DEF	PARTMENT OF	COMMERCE		
An de		Effective on 12/08/2				plete if Know	*			
STEVE STRACE	Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			3). Application No	Application Number 10		10/827,296-Conf. #2568			
	FEE TRANSMITTAL			Filing Date			April 20, 2004			
	For FY 2008						Michael B. Zemel  E. J. Webman			
	- Applianat									
	<del></del>	claims small entity statu		Art Unit		1616 31894-202098				
	TOTAL AMOUNT		(\$) 180.00	Attorney Dock	et No.	31034-202030	<u> </u>			
	METHOD OF	PAYMENT (check	all that apply)							
	Check Credit Card Money Order None Other (please identify):									
	x Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP									
	For the a	bove-identified depo	sit account, the Direct	or is hereby authori	ized to: (ched	ck all that apply)				
	x Ch	arge fee(s) indicated	below	Cha	rge fee(s) ind	dicated below, ex	xcept for the	ə filing fee		
;		arge any additional fo	ee(s) or underpaymen	s of x Cred	dit any overpa	ayments				
	FEE CALCUL		TO ATIO 1.17							
	1. BASIC FILING	S, SEARCH, AND EX	(AMINATION FEES							
		FIL		SEARCH FEES		NATION FEES				
	Application Ty	pe Fee (\$	Small Entity Fee (\$) Fe	Small Entite  (\$) Fee (\$)	Y Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)		
•	Utility	310	155 5	10 255	210	105				
	Design	210	105 1	00 50	130	65				
	Plant.	210		10 155	160	80				
	Reissue	310		10 255	620	310				
	Provisional	210	105	0 0	0	0				
	2. EXCESS CLA	IM FEES					<u>Fee (\$)</u>	Small Entity Fee (\$)		
	Fee Description Each claim over	20 (including Reiss	ues)				50	25		
		nt claim over 3 (incl	•				210	105		
	Multiple depend	ent claims					370	185		
	Total Claims	Extra Claims	Fee (\$) F	ee Paid (\$)	<u>M</u>	ultiple Depende	ent Claims			
		40 = >			<u>Fe</u>	e (\$) Fee Paid (\$)				
		per of total claims paid for	•	no Doid (P)				-		
	Indep. Claims 6	Extra Claims	Fee (\$) F	ee Paid (\$)						
			paid for, if greater than 3.							
	3. APPLICATION									
	If the specificat	tion and drawings ex	ceed 100 sheets of pa	per (excluding elec	ctronically fi	led sequence or	computer			
			he application size fe 5 U.S.C. 41(a)(1)(G)			ntity) for each a	idaitional 50			
	<u>Total Sheets</u>		,,,,,,	ch additional 50 or f	•	<u>f Fee (\$)</u>	Fee P	aid (\$)		
				(round up to a w	vhole number)	х	=			
	4. OTHER FEE(	•	) C ( 11				Fees F	Paid (\$)		
	_	= 1	) fee (no small entity of 1806 Submission of		Disclosure	Statement	180	0.00		
	SUBMITTED BY	Sur charge).		a.riormation		Cocomon	100			
	Signature	ALL ALL		Registration No.	31,957	Telephone	(202) 344	4000		
	Name (Print/Type)	Michael A. Gollin		(Attomey/Agent)	31,007	Date	March 28			
	manie (Fruit Type)	WINGI A. GUIIII				Date	IVIAI CII 20	, 2000		

PTO/SB/21 (01-08)
Approved for use through 01/31/2008. OMB 0651-0031
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(to be used for all correspondence after initial filing)

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	Application Number	10/827,296-Conf. #2568				
	Filing Date	April 20, 2004				
	First Named Inventor	Michael B. Zemel				
	Art Unit	1616				
	Examiner Name	E. J. Webman				
,	Attorney Docket Number	31894-202098				

ENCLOSURES (Check all that apply)									
X Fee Transmittal Form	Drawing(s)		After Allowance Communication to TC						
Fee Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences						
X Amendment/Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)						
After Final	Petition to Convert to a Provisional Application		Proprietary Information						
X Declaration of Michael B. Zemel under 1.132	Request for Withdrawal of the Notice of Withdrawal from Issue, etc.		Status Letter						
Extension of Time Request	Terminal Disclaimer		Other Enclosure(s) (please Identify below):						
Express Abandonment Request	Request for Refund		PTO Form SB08A with 20 references attached						
X Information Disclosure Statement	CD, Number of CD(s)								
Certified Copy of Priority Document(s)	Landscape Table on C	D							
Reply to Missing Parts/ Incomplete Application	Remarks								
Reply to Missing Parts under 37 CFR 1.52 or 1.53	·								
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT									
Firm Name VENABLE LLP									
Signature									
Printed name Michael A. Gollin	d name Michael A. Gollin								
Date March 28, 2008	F	Reg. No.	31,957						